L16000128247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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D. SCOTT
MAY 17 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 26, 2017

2017 MAY 15 AM 9:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M POWERED, LLC
PO BOX 2331
HANDERSONVILLE, NC 28793

SUBJECT: M POWERED, LLC
Ref. Number: L16000128247

We have received your document for M POWERED, LLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE INCLUDE ADDRESS ON #5 OF APPLICATION.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux
Regulatory Specialist

Letter Number: 017A00008160

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M POWERED LLC
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARTIN MILANESE
(Name of Person)

(Firm/Company)

P.O. BOX 2331
(Address)

HENDERSONVILLE, NC, 28793
(City/State and Zip Code)

For further information concerning this matter, please call:

MARTIN MILANESE at (727) 744 1525
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ $25.00 Filing Fee and Certificate of Dissolution

☐ $55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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05 MAY 15 PM 1:42
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TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
M POWERED LLC

2. The Articles of Organization were filed on JULY 1ST, 2016 and assigned document number L16000128247

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
WANT IT CLOSE BECAUSE I FOUND A JOB OUT OF STATE.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: MARTIN MILANESE - MANAGING MEMBER/OWNER.
P.O. BOX 2331
HENDERSONVILLE, NC, 28793.

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Signature

MARTIN MILANESE.
Printed Name

FILING FEE: $25.00

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA